

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AF</i>	2192	3/1/00
O.I.P.E. CLASSIFIER	<i>LM</i>	32	3/23
FORMALITY REVIEW		70029	3/29
RESPONSE FORMALITY REVIEW	<i>RR</i>		5/10/00

## INDEX OF CLAIMS

## BEST AVAILABLE COPY

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	12/29
2	✓	✓	12/29
3	✓	✓	12/29
4	✓	✓	12/29
5	✓	N	12/29
6	✓	✓	12/29
7	✓	✓	12/29
8	✓	N	12/29
9	✓	✓	12/29
10	✓	✓	12/29
11	✓	✓	12/29
12	✓	✓	12/29
13	✓	✓	12/29
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20	✓	✓	12/29
21	✓	✓	12/29
22	✓	N	12/29
23	✓	✓	12/29
24	✓	✓	12/29
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If more than 150 claims or 10 actions  
staple additional sheet here